

<b>REQUEST FOR QUOTATION</b> (THIS IS NOT AN ORDER)			THIS RFO <input checked="" type="checkbox"/> IS <input type="checkbox"/> IS NOT A SMALL BUSINESS SET-ASIDE			PAGE 1 OF 11 PAGES	
1. REQUEST NO. N00173-06-Q-0093		2. DATE ISSUED 05/11/06		3. REQUISITION/PURCHASE REQUEST NO. 55-8048-06		4. CERT. FOR NAT. DEF. UNDER BDSA REG. 2 AND/OR DMS REG. 1	
5a. ISSUED BY Supply Officer (Code 3410) Naval Research Laboratory, Washington DC 20375						6. DELIVER BY (Date) 30 Days	
5b. FOR INFORMATION CALL: (NO COLLECT CALLS)						7. DELIVERY <input checked="" type="checkbox"/> FOB DESTINATION <input type="checkbox"/> OTHER (See Schedule)	
NAME Lillian M Moore			TELEPHONE NUMBER AREA CODE 202 NUMBER 767-3320			9. DESTINATION	
8. TO:						a. NAME OF CONSIGNEE Naval Research Laboratory	
a. NAME To All Quoters			b. COMPANY			b. STREET ADDRESS 4555 Overlook Ave SW Bldg 49	
c. STREET ADDRESS						c. CITY Washington	
d. CITY			e. STATE		f. ZIP CODE		d. STATE DC
						e. ZIP CODE 20375	
10. PLEASE FURNISH QUOTATIONS TO THE ISSUING OFFICE IN BLOCK 5a ON OR BEFORE CLOSE OF BUSINESS (Date)  05/22/06		IMPORTANT: This is a request for information, and quotations furnished are not offers. If you are unable to quote, please so indicate on this form and return it to the address in Block 5a. This request does not commit the Government to pay any costs incurred in the preparation of the submission of this quotation or to contract for supplies or service. Supplies are of domestic origin unless otherwise indicated by quoter. Any representations and/or certifications attached to this Request for Quotation must be completed by the quoter.					
<b>11. SCHEDULE (Include applicable Federal, State and local taxes)</b>							
ITEM NO. (a)	SUPPLIES/SERVICES (b)			QUANTITY (c)	UNIT (d)	UNIT PRICE (e)	AMOUNT (f)
	See attached continuation sheet						
12. DISCOUNT FOR PROMPT PAYMENT				a. 10 CALENDAR DAYS (%)	b. 20 CALENDAR DAYS (%)	c. 30 CALENDAR DAYS (%)	d. CALENDAR DAYS
							NUMBER PERCENTAGE
NOTE: Additional provisions and representations <input type="checkbox"/> are <input type="checkbox"/> are not attached.							
13. NAME AND ADDRESS OF QUOTER				14. SIGNATURE OF PERSON AUTHORIZED TO SIGN QUOTATION		15. DATE OF QUOTATION	
a. NAME OF QUOTER				16. SIGNER			
b. STREET ADDRESS							
c. COUNTY				a. NAME (Type or print)		b. TELEPHONE	
						AREA CODE	
d. CITY			e. STATE	f. ZIP CODE	b. TITLE (Type or print)		NUMBER

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**STANDARD FORM 18** (Rev. 6-95) (EG)  
Prescribed by GSA-FAR (48 CFR) 53.215-1(a)

STANDARD FORM 36 JULY 1966 GENERAL SERVICES ADMINISTRATION FED. PROC. REG. (41 CFR) 1-16.101		CONTINUATION SHEET		REF. NO. DOC. BEING CONT'D N00173-06-Q-0093		PAGE OF 2 11	
To All Quoters							
ITEM NO.	SUPPLIES/SERVICES	QUANTITY	UNIT	UNIT PRICE	AMOUNT		
0001	Cisco 3845 Bundle, Adv Security, 64F/256D Part #CISCO3845SEC/K9 or equal	3	Ea				
0002	4-Port Serial Network Module, Part #NM-4T or equal	3	Ea				
0003	36 Port 10/100 Ether Switch NM, 2 Gig Port, Part #NMD-36-ESW-2GIG or equal	3	Ea				
0004	Cisco 3845 Advanced Security, Part #S384ASK9-12403 or equal	3	Ea				
0005	1000 Base T Card for Ether Switch Modules, Part #GE-DCARD-ESW or equal	6	Ea				
0006	Cisco 3845 AC Power Supply, Part #PWR-3845-AC or equal	3	Ea				
0007	256BM SDRAM Default Memory for 3800, Part #MEM3800-256DINCL or equal	3	Ea				
0008	64MB Cisco 3800 Compact Flash Memory, Part #MEM3800-64CFINCL or equal	3	Ea				
0009	Power Cord, 110V, Part #CAB-AC	3	Ea				
0010	Device Manager for Routers, Part #Router-SDM or equal	3	Ea				
0011	Smartnet 8X5XNBD 3845 Security Bundle, Part #CON-SNT-3845SEC or equal	3	Ea				
0012	Male DTE RS-530 Cable, 10 foot, Part #CAB-530MT or equal	2	Ea				
0013	RS-232 Cable, DCE, Female, 10 feet, Part #CAB-232FC or equal	1	Ea				
0014	RS-232 Cable, DTE, Male, 10 feet, Part #CAB-232MT or equal	2	Ea				
0015	RS-449 Cable, DCE, Female, 10 feet, Part #CAB-449FC or equal	1	Ea				
0016	RS-449 Cable, DTE, Male, 10 feet, Part #CAB-449MT	2	Ea				
0017	Dual Ethernet Security Router, Part #Cisco871-K9 or equal	2	Ea				
0018	Smartnet 8X5XNBD Dual Ethernet Security, Part #CON-SNT-Cisco87 or equal	2	Ea				

Please fax quotation to Lillian Moore @202-767-1708 or  
Fed Ex to: Naval Research Laboratory, 4555 Overlook Ave  
SW, Code 3411, Washington DC 20375.

Note: Any questions concerning this RFQ should be e-  
mailed to this account [SolQnA@labmis.nrl.navy.mil](mailto:SolQnA@labmis.nrl.navy.mil) five  
(5) days prior to the closing date in Block 10 of the RFQ.

Please attach a Published Price List or Cost Breakdown to  
the Quotation.